COMBINED DECLARATION AND POWER OF ATTORNEY (ORIGINAL, SUPPLEMENTAL, DIVISIONAL, CONTINUATION, OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

☑ original

☐ design

☐ supplemental

☐ divisional

☐ continuation

☐ continuation-in-part

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

ENGINE LUBRICANT USING MOLYBDENUM DITHIOCARBAMATE AS AN ANTIOXIDANT TOP TREATMENT IN HIGH SULFUR BASE STOCKS

insert title above

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))

- (a) Is attached hereto and/or is identified herein by name of inventor(s), attorney docket number and title..
- (b) ☐ was filed on _____ as ☐ Serial No. 0/____ or

🗆 Express Mail No	$_$, \square and was amended on	(if applicable)
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ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the aboveidentified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37, CODE OF FEDERAL REGULATIONS, § 1.56.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number.)

David M. Shold, 31,664 Samuel B. Laferty, 31,537 Teresan W. Gilbert, 31,360 Michael F. Esposito, 29,506 Jeffrey F. Munson, 45,705

THE CASE AND A SECOND RESIDENCE AND A SECOND

SEND CORRESPONDENCE TO

Full name of sole or first inventor

THE LUBRIZOL CORPORATION
Patent Dept. - Patent Administrator-022B
29400 Lakeland Boulevard
Wickliffe, OH 44092-2298

DIRECT TELEPHONE CALLS TO:	
(Name and telephone number)	
David M. Shold	

(440) 347-1601

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under SECTION 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Jack	C.	Kellev
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	Kelley (FAMILY OR LAST NAME)
Inventor's signature _	And (Kelly	
Date 3/6/02	Country of Citizenship	U.S.A.
Residence	Chagrin Falls, Ohio	
(city and state or foreign country)		
Post Office Address _	8680 Peppermill Run	
	Chagrin Falls, OH 44023	
Full name of second j	oint inventor, if any	
Full name of second jo		(FAMILY OR LAST NAME)
(GIVEN NAME)		(FAMILY OR LAST NAME)
(GIVEN NAME) Inventor's signature	(MIDDLE INITIAL OR NAME)	
(GIVEN NAME) Inventor's signature	(MIDDLE INITIAL OR NAME)	
(GIVEN NAME) Inventor's signature Date	(MIDDLE INITIAL OR NAME) Country of Citizenship	

Docket No. 3050-02

Full name of third joint inv	entor, if any	
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	(FAMILY OF LAST NAME)
Inventor's signature		
Date	Country of Citizenship	
Residence		
Post Office Address		
Full name of fourth joint in	ventor, if any	
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	(FAMILY OR LAST NAME)
Inventor's signature		
Date	Country of Citizenship	
Residence	····	
Post Office Address		
CHECK PROPER BOXES FO	R ANY OF THE FOLLOWING ADDED OF THIS DECLARATION	PAGE(S) WHICH FORM A PART
☐ Signa pages added	ature for fifth and subsequent	joint inventors. Number of
	combined declaration and pow tion-in-part (CIP) application or	
E	Number of pages added1	 '
If no further pages form a	a part of this Declaration then on page and check the following	
	This declaration ends with this	page

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION AND CIP APPLICATION

(complete this part only if this is a divisional, continuation or CIP application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States applications) or PCT International application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information that is material to the examination of this application, namely, information where there is substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 USC 120:				
U.S. APPLICATIONS Status (Check one)				
U.S. APPLICATIONS	U.S. FILING DATE	Patented	Pending	Abandoned
1.0/				
2.0/				
3.0/				

[X] I HEREBY CLAIM THE BENEFIT UNDER 35 U.S.C. § 119(E) OF ANY UNITED STATES PROVISIONAL APPLICATION(S) LISTED BELOW:

U.S. PROVISIONAL APPLICATION	FILING DATE
1. 60/278,052	March 22, 2001
2. 60/290,081	May 10, 2001
3. 60/	